US EPA RECORDS CENTER REGION 5

U.S. Postal Service CERTIFIED MAIL RECEIPT (Domestic Mail Only; No Insurance Coverage Provided) 3070 Postage _ 029 LOOD Certified Fee Return Receipt Fee (Endorsement Required) 9000 Restricted Delivery Fee (Endorsement Required) USPO) Total Postaco. 0350 3 M Corp. Sent To Attn: Brian Davis Street, Apt. 1 P.O. Box 33428 7001 or PO Box N St. Paul. MN 55133-3428 City, State. PS:Form-380 ions

Certified Mail Provides:

- A mailing receipt
- A unique identifier for your mailpiece
- A signature upon delivery

A record of delivery kept by the Postal Service for two years

Important Reminders: Certified Mail may ONLY be combined with First-Class Mail or Priority Mail.

- Certified Mail is not available for any class of international mail.
- NO INSURANCE COVERAGE IS PROVIDED with Certified Mail. For valuables, please consider Insured or Registered Mail.
- For an additional fee, a Return Receipt may be requested to provide proof of
- delivery. To obtain Return Receipt service, please complete and attach a Return Receipt (PS Form 3811) to the article and add applicable postage to cover the
- fee. Endorse mailpiece "Return Receipt Requested". To receive a fee waiver for a duplicate return receipt, a USPS postmark on your Certified Mail receipt is required.
- For an additional fee, delivery may be restricted to the addressee or addressee's authorized agent. Advise the clerk or mark the mailpiece with the endorsement "Restricted Delivery". If a postmark on the Certified Mail receipt is desired, please present the arti-
- cle at the post office for postmarking. If a postmark on the Certified Mail receipt is not needed, detach and affix label with postage and mail.

IMPORTANT: Save this receipt and present it when making an inquiry.

PS Form 3800, January 2001 (Reverse)

102595-01-M-1049

Control March 1997 (1997)	
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Received by (Please Print Clearly) B. Date of Delivery C. Signature Agent Addressee
1. Article Addressed to: 3 M Corp Attn: Brian Pavis CEIVEN P.O. Box 33428	(D) Is delivery address different from item 1?
St. Paul, MN 55133-3428 OCT 1 5 2003 SUPERFUND DIVISION	3. Service Type Certified Mail Registered Return Receipt for Merchandise Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee)
2. Article Number (Transfer from service label) 7001 0320 0006 0294 3070	
PS Form 3811, March 2001 Domestic Ref	turn Receipt 102595-01-M-1424

